

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**ASSOCIATE POWER OF
ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number		09/728,534
Filing Date		November 28, 2000
First Named Inventor		Merrill Goldenberg
Title	POLYOL/OIL SUSPENSIONS FOR THE SUSTAINED RELEASE OF PROTEINS	
Art Unit	1646	
Examiner Name	Not Yet Assigned	
Attorney Docket No.	01017/30010/US	

I hereby appoint:

☒ Practitioners associated with the Customer Number 04743

OR

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

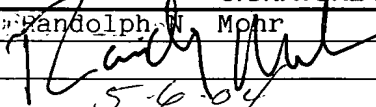
<input type="checkbox"/> Firm or Individual Name					
Address					
City		State		Zip	
Country		Telephone		Fax	

I am the:

☒ Attorney of Record.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Attorney of Record

Name	Randolph W. Monr		
Signature			
Date	5-6-04	Telephone	805 447-8947

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.